

Use of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number, per each, in order of birth stated.

PLACE OF BIRTH		ARIZONA STATE BOARD OF HEALTH	
1. County of	<i>Gila County</i>	BUREAU OF VITAL STATISTICS	
District of	<i>Miami</i>	ORIGINAL CERTIFICATE OF BIRTH	
Town of	<i>Miami</i>	State Index No.	<i>148</i>
or		County Registrar No.	<i>769</i>
City of		Local Registrar No.	
(If birth occurred in a hospital or institution, give its NAME instead of street and number)		No.	St. Ward
2. Full name of child		<i>Alberto Garcia</i>	
3. Sex of Child		To be answered ONLY in event of plural births.	
4. Twin, triplet or other.		5. No., in order of birth.	
6. Legitimate?		7. Date of birth	
		<i>August 6 - 1926</i>	
		Month day year	
8. FATHER		14. MOTHER	
Full name		Full maiden name	
<i>Mariano Garcia</i>		<i>Concepcion Paderna</i>	
9. Residence (Usual place of abode)		15. Residence (Usual place of abode)	
<i>Pemayo</i>		<i>Pemayo</i>	
If nonresident, give place and state		If nonresident, give place and state	
<i>Huerfano</i>		<i>Huerfano</i>	
10. Color or race		16. Color or race	
<i>Mexican</i>		<i>Mexican</i>	
11. Age at last birthday		17. Age at last birthday	
<i>42 (Years)</i>		<i>30 (Years)</i>	
12. Birthplace (city or place)		18. Birthplace (city or place)	
<i>Miami</i>		<i>Miami</i>	
(State or country)		(State or country)	
<i>Gila County</i>		<i>Gila County</i>	
13. Occupation		19. Occupation	
Nature of industry		Nature of industry	
<i>Savior</i>		<i>Domestic</i>	
20. Number of children of this mother		21. Were precautions taken against ophthalmia neonatorum?	
(Taken as of time of birth of child herein certified and including this child.)		(a) Born alive and now living	
		(b) Born alive but now dead	
		(c) Stillborn	
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*			
I hereby certify that I attended the birth of this child, who was <i>Born dead</i> at <i>1:00</i> m. on the date above stated.			
(Born alive or stillborn.)			
Signature <i>Resista Gutierrez</i>			
(Physician or midwife)			
Address <i>3000 S. 1st St. Phoenix, Ariz.</i>			
Given name added from supplemental report <i>agosto</i>			
Month, day, year.			
<i>August 10, 1926</i>			
Filed <i>Aug 10, 1926</i>			
Local Registrar <i>J. E. Dorn</i>			
County Registrar <i>Gila County</i>			
Registrar <i>Alond ariz</i>			

171-806-331